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CONFIRMATION NO. 7162

<b>SERIAL NUMBER</b> 10/789,030	<b>FILING OR 371(c) DATE</b> 03/01/2004 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3767	<b>ATTORNEY DOCKET NO.</b> SDF 04-1
<b>APPLICANTS</b> Joel R. Studin, Great Neck, NY;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 05/19/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no		<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 13 <sup>1</sup> 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged		Examiner's Signature	Initials	
<b>ADDRESS</b> The law Office of Stuart D. Frenkel, P.C. Suite 330 3975 University Drive Fairfax, VA22030				
<b>TITLE</b> Breast implant introducer				
<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	